



Online Giving Request



Name	<input type="text"/>	Phone	<input type="text"/>
Mailing Address	<input type="text"/>	Email	<input type="text"/>
City, State, Zip	<input type="text"/>		

Please select one of the following:

- This is a new or one-time giving request
- Please replace my current giving request already on file with this request
- Please remove any active giving request on file

Online Giving Request:

- One-time gift
 - Monthly on the 5th
 - Twice per month
 - Monthly on the 20th
- (on the 5th and 20th)

Bank Information:

Amount and Start Date	Amount:	Start Date:
Name of account holder	<input type="text"/>	
Bank name	<input type="text"/>	
Bank routing number	<input type="text"/>	
Bank account number	<input type="text"/>	
	<input type="checkbox"/> Checking account	<input type="checkbox"/> Savings account

Please attach a voided check

Print, complete and return via fax 972.838.4276, email at info@firstmelissa.com or mail to:
 First Melissa, 2101 Melissa Road East, Melissa TX 75454
 Questions?: Contact the First Melissa Finance Director at 972.838.2277

I hereby authorize First Baptist Church Melissa, on behalf of Embrace Brasil, to initiate debit entries to my checking/savings account as indicated above at the bank named. This authorization is to remain in full force and effect until First Baptist Church Melissa has received written notice from me of its termination in such a manner as to afford First Baptist Church Melissa and the bank and reasonable opportunity to act on it.

Signature	<input type="text"/>	Date	<input type="text"/>
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